Overview of the Annual Performance Report Development:

In Michigan, the redesign of the Part C system continues in conjunction with the development of the data collection and reporting processes for the SPP/APR. Meant to improve services to children and families, the redesign has also allowed Michigan to set priorities and goals for the system, consistent with the focus identified by OSEP through the SPP.

Through periodic updates, web postings, personal contacts and state training opportunities, the field is being kept informed of both the redesign work and the development of the child and family outcome requirements and processes and how they fit together. As Michigan identifies system needs through the review of redesign and SPP/APR data, staff form work groups or committees to address the issues. When appropriate, representatives from the field are invited to participate in that work.

The APR has been developed by state interagency staff working together with a number of contractors to collect, analyze, and report data, set targets, and develop improvement activities. The draft APR was presented to the SICC on November 17, 2006. Their comments were incorporated into the report and it and the revised SPP will be posted on the internet with an announcement of the posting to the field. The state's progress and slippage in meeting its targets from the original SPP will be reported to the SICC and the field in late January and early February. The performance of each of the 57 service areas will be reported to the field and the SICC and made public in early spring of 2007. Staff have been working closely with both the 618 data collection grantee and the Office of Special Education to develop the format for reporting the service areas' performance.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 1: Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement:

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Account for untimely receipt of services.

FFY	Measurable and Rigorous Target
2005	100%

Actual Target Data for FFY 2005:

- Monitoring data (record review) from 12 service areas shows 19% of all services were delivered within 30 days of the parent signing the IFSP.
- Local Self-Assessment data from 57 service areas shows 70.82% of all services were delivered within 30 days of the parent signing the IFSP.

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Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage That Occurred for FFY 2005:

The data sources reflect a large discrepancy between what is actually occurring and what service areas are reporting is occurring. During record review, monitors are looking to see documentation showing that services occurred. Service areas do not depend solely on documentation within the files when completing their self-assessments. Documentation is likely the cause of the discrepancy between data sources. The CSPD contractor will provide training on how to document the provision of services.

Michigan has modified its definition for timely services since the submission of the original SPP in December 2005. To understand the question of why early intervention services are untimely, Michigan is attempting to understand first the definition of timely services, then if services were untimely because of exceptional family circumstances or because local service areas were not able to begin services for the child/family within 30 days. A 'Timely Services Reference Bulletin' was developed and distributed at the *Early On* Conference in the spring of 2006 and public comments were taken. The bulletin states that "All services must be provided within 30 days from when a parent/guardian consents to the provision of early intervention services." Comments were incorporated, and at the System Update meetings in November and December 2006, the final bulletin will be shared. It will receive formal public comment in the spring of 2007 and be included in the updated Michigan State Plan. Documenting timely services, with the new definition, is a new requirement and service areas have not previously been asked to report whether or not services were delivered within 30 days, nor have they been monitored for it; which could explain missing the target by a large margin.

An 'Exceptional Circumstances Reference Bulletin' was also created and states that, "An exceptional circumstance refers to the family's need to postpone one of the required components of IDEA 2004 from occurring. Examples of exceptional circumstances are: family illness, hospitalization, natural disaster. When a family cites an exceptional circumstance, it must be noted in the IFSP. Exceptional family circumstances documented in the child's record could be a cause for delay in provision of evaluation and assessment, timely services, and transition planning." The CSPD contractor will provide trainings around documentation of exceptional circumstances.

Collecting data on the timeliness of services and on possible exceptional family circumstances is not possible with our current data collection system. During the course of the year, it became clear that adding data elements to the current data system was not a viable option; instead there will be a close examination of the variety of needs related to data collection, and exploration of options for upgrading the system to meet all of the identified needs.

To clarify a question from OSEP, on page 3 of the SPP submitted in December 2005, the chart representing 84% of families receiving their services within 30 days was taken from family interview data from *Early On* System Review, rather than family survey data. For these interviews, sampling from selected service areas was conducted for the purpose of Record Review and represented 10% of the period count for that area or ten records, whichever was greater. Sampling was random to ensure equal representation by gender, ethnicity, eligibility, and age, as well as inclusive of records in different phases of *Early On* (procedural safeguards, IFSP, reviews, and transition). For each service listed on their IFSP, families were asked whether they received that service, how long after their IFSP meeting they first started receiving it, if the receipt of service was timely, how frequently the family received services (compared to the frequency on the IFSP), and if that was often enough for families.

The *Early On* Family Survey, however, is sent annually to every family recorded as participating in *Early On* as of the December 1 snapshot count through the 618 data collection system.

State- Michigan

Revisions, <u>with Justification</u>, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2005:

Because of the realization that simply updating our current data collection system would not be sufficient for our data needs, the timeline for completion of the data collection system improvements required extension to those reflected in the SPP.

Overview of the Annual Performance Report Development:

Please see explanation preceding Indicator #1.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 2: Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children.¹ (20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement: Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children) divided by the (total # of infants and toddlers with IFSPs)] times 100.

FFY	Measurable and Rigorous Target
2005	86%

Actual Target Data for FFY 2005:

	12/1/02	12/1/03	12/1/04	12/1/05
% of infants and toddlers who primarily receive early intervention services in the home or programs for typically developing children.	76.82%	77.46%	84.41%	84.2%

Source: EETRK Trend Charts, Primary Setting Percentages for State Totals Based on Snapshot Counts

The 618 Data Collection System shows a steady increase in services being received in the home or in programs for typically developing children except for a slight drop in FFY 2005. This may be due to clearer definitions of natural environment and improvements in data collection. However the slippage is so statistically insignificant it is difficult to pinpoint the cause.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage That Occurred for FFY 2005:

Throughout 2005, the CSPD contractor provided 13 trainings regarding natural environments, which incorporated elements from the Implementation Guide to Natural Environments. Tracking and follow up of the trainings were done through evaluations by the Qualitative Compliance Information Project.

CIMS focused monitoring began in the spring of 2006 and is ongoing. Two service areas will receive focused monitoring for natural environments in FFY 2006. They will also complete improvement plans and initiate those plans in FFY 2006, while additional service areas are targeted for focused monitoring for this indicator.

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¹ At the time of the release of this package, revised forms for collection of 618 state reported data had not yet been approved. Indicators will be revised as needed to align with language in the 2005-2006 state reported data collections.

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In response to OSEP's question from the December 2005 SPP submission about the discrepancy between 618 data, the parent survey, and monitoring data:

- During monitoring for 2005, monitors looked at IFSPs for documentation for settings for each service. Documentation is a continuing issue for Michigan. Details regarding services delivered are not always well documented on the IFSP. The CSPD grantee, with guidance and support from *Early On* administration, is working to resolve this issue.
- The Family Survey reflects the parent's recollection of service delivery as well as their satisfaction with the services, which for parents in *Early On* continues to be high.

Revisions, <u>with Justification</u>, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2005:

Because of the realization that simply updating our current data collection system would not be sufficient for our data needs, the timeline for completion of the data collection system improvements required extension to those reflected in the SPP.

Overview of the Annual Performance Report Development:

Please see explanation preceding Indicator #1.

Monitoring Priority: Effective General Supervision Part C/Child Find

Indicator 5: Percent of infants and toddlers birth to 1 with IFSPs compared to:

A. Other States with similar eligibility definitions; and

B. National data.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to National data.

FFY	Measurable and Rigorous Target
2005	1.1%

Actual Target Data for FFY 2005:

	12/1/02	12/1/03	12/1/04	12/1/05
% of infants and toddlers birth to 1 with IFSPs in	0.9%	1.0%	1.1%	1.03%
Michigan				
Hawaii	2.6%	3.0%	2.8%	2.31%
Louisiana	0.5%	1.3%	1.7%	1.79%
Ohio	0.7%	0.9%	0.8%	1.33%
Vermont	1.2%	1.0%	0.9%	1.10%
% national	1.0%	0.9%	0.9%	0.95%

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that Occurred for FFY 2005:

Michigan experienced a .07% slippage in children birth to one year of age. Because of the statistically small amount of slippage, it is difficult to determine the exact cause in order to target improvements. Therefore, the plan is to continue on the path of continuous improvement activities defined in the SPP.

The eligibility task force has reviewed and taken public comment regarding Michigan's Part C eligibility definition. The proposed definition sets eligibility for infants under two months adjusted age at any level of delay with redetermination within six months, and eligibility for children over two months adjusted age with a 20% delay in one or more areas of development. The task force also developed an eligibility

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process chart to clarify the steps and timelines involved in the eligibility, enrollment, and service processes. The entire eligibility definition and process is slated for public hearing in 2007.

The CAPTA Ad Hoc workgroup is continuing to meet. The Department of Human Services (DHS) initiated an automatic referral process to be piloted in four counties. This data management system is called Service Worker Support System (SWSS). In conjunction with the automatic referral process the *Early On* staff at DHS is doing a formalized evaluative pilot to determine the effectiveness of the automated system. This will also include an evaluation of the communication link between the local ISD and the local DHS. The ad hoc committee will incorporate these findings into their recommendations for joint policy on the referral of substantiated abuse/neglect children.

CIMS focused monitoring began in the spring of 2006 and is ongoing. Two service areas received focused monitoring in FFY 2005. They will develop and implement improvement plans in FFY 2006.

The *Early On* redesign process is ongoing. However, some suggestions from the work have been implemented including the use of television and billboards to promote public awareness of *Early On*. Additionally, a new public awareness grantee has created a new website where locals can access free public awareness materials. We believe these efforts will have a positive effect on Michigan's child find numbers.

Revisions, <u>with Justification</u>, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2005:

Because the redesign process is not yet completed and the priority areas for the purchasing plan are currently in discussion, these timelines were extended to those reflected in the SPP.

Overview of the Annual Performance Report Development:

Please see explanation preceding Indicator #1.

Monitoring Priority: Effective General Supervision Part C/Child Find

Indicator 6: Percent of infants and toddlers birth to 3 with IFSPs compared to:

A. Other States with similar eligibility definitions; and

B. National data.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to the same percent calculated for other states with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to national data.

FFY	Measurable and Rigorous Target
12/1/2005	2.2%

Actual Target Data for FFY 2005:

	12/1/02	12/1/03	12/1/04	12/1/05
% of infants and toddlers birth to 3 with IFSPs in	1.9%	2.1%	2.2%	2.20%
Michigan				
Hawaii	3.9%	4.4%	4.3%	4.31%
Louisiana	1.3%	1.8%	2.3%	1.76%
Ohio	1.6%	1.9%	1.8%	2.47%
Vermont	3.1%	3.3%	3.2%	3.20%
% national	2.16%	2.18%	2.2%	2.34%

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage That Occurred for FFY 2005:

The eligibility task force has reviewed and taken public comment regarding Michigan's Part C eligibility definition. The proposed definition sets eligibility for infants under two months adjusted age at any level of delay with redetermination within six months, and eligibility for children over two months adjusted age with a 20% delay in one or more areas of development. The task force also developed an eligibility process chart to clarify the steps and timelines involved in the eligibility, enrollment, and service processes. The entire eligibility definition and process is slated for public hearing in 2007.

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The CAPTA Ad Hoc workgroup is continuing to meet. The Department of Human Services (DHS) initiated an automatic referral process to be piloted in four counties. This data management system is called Service Worker Support System (SWSS). In conjunction with the automatic referral process the *Early On* staff at DHS is doing a formalized evaluative pilot to determine the effectiveness of the automated system. This will also include an evaluation of the communication link between the local ISD and the local DHS. The ad hoc committee will incorporate these findings into their recommendations for joint policy on the referral of substantiated abuse/neglect children.

CIMS focused monitoring began in the spring of 2006 and is ongoing. Two service areas received focused monitoring in FFY 2005. They will develop and implement improvement plans in FFY 2006.

The *Early On* redesign process is ongoing. However, some suggestions from the work have been implemented including the use of television and billboards to promote public awareness of *Early On*. Additionally, a new public awareness grantee has created a new website where locals can access free public awareness materials. We believe these efforts will have a positive effect on Michigan's child find numbers.

Revisions, <u>with Justification</u>, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2005:

Because the redesign process is not yet completed and the priority areas for the purchasing plan are currently in discussion, these timelines were extended to those reflected in the SPP.

Overview of the Annual Performance Report Development:

Please see explanation preceding Indicator #1.

Monitoring Priority: Effective General Supervision Part C/Child Find

Indicator 7: Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline. (20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(# of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline) divided by the (# of eligible infants and toddlers evaluated and assessed)] times 100.

Account for untimely evaluations.

FFY	Measurable and Rigorous Target
2005	100%

Actual Target Data for FFY 2005:

Of 6,174 eligible infants and toddlers with IFSPs who were first enrolled in FFY 2005, 4,001 (64.8%), had an evaluation and assessment and an initial IFSP meeting within Part C's 45-day timeline.

The average number of days to completed IFSP is 44 days. (Source: FFY 2005 618 data)

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that Occurred for FFY 2005:

While Michigan has not yet reached the 100% target for completing evaluation, assessment, and initial IFSP meetings within 45-days from referral, significant improvement was made from FFY 2004 when only 56.8% were on time and the average number of days to IFSP completion was 58 days. It is likely that increased scrutiny of this compliance indicator by the state at the local level in response to the FFY 2003 APR improvement activities has lead to much of the demonstrated improvement for this indicator.

At this time, Michigan's data system only measures the days from referral to completed IFSP. It is difficult for Michigan to determine when the initial IFSP meeting was held or the reasons why the timeline was not met for some children. During the past year, it became clear that adding data elements to the current system was not a viable option. However, there will be a close examination of Michigan's needs related to data collection and exploration of options for upgrading the system to meet all of those needs so that more detailed data can be reported in the future.

During FFY 2005, a Reference Bulletin regarding timeliness of services was written and shared with the field in spring 2006. This Bulletin explained that while the multidisciplinary, comprehensive evaluation of

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infants and toddlers must be completed within 45 days of referral, only the initial IFSP meeting had to be held within that time frame; the initial IFSP does not have to be completed within 45 days. Michigan is requiring that the initial IFSP must be completed within 60 days of referral. Michigan is defining the initial IFSP meeting as a discussion between the service coordinator and the family regarding the proposed resources and supports that align with the family's priorities for the child identified during eligibility determination process. This definition will be added to the timeliness of services bulletin.

The continued implementation of the activities described in the SPP will help Michigan continue to improve in this area.

Revisions, <u>with Justification</u>, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2005:

Random verification of records in 12 local service areas confirmed that while service areas are making improvements in ensuring that evaluations and initial IFSP meetings are held within 45 days, there continues to be concern around the completeness of the evaluations. Specifically, local service areas are having difficulty collecting information on the child's health status including vision and hearing status within the timeframe.

Overview of the Annual Performance Report Development:

Please see explanation preceding Indicator #1.

Monitoring Priority: Effective General Supervision Part C/Effective Transition

Indicator 8: Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:

- A. IFSPs with transition steps and services;
- B. Notification to LEA, if child potentially eligible for Part B; and
- C. Transition conference, if child potentially eligible for Part B.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = [(# of children exiting Part C who have an IFSP with transition steps and services) divided by the (# of children exiting Part C)] times 100.
- B. Percent = [(# of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.
- C. Percent = [(# of children exiting Part C and potentially eligible for Part B where the transition conference occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.

FFY	Measurable and Rigorous Target
FFY 2005	100%

Actual Target Data for FFY 2005:

- A. IFSPs with transition steps and services
 - This data is collected as a part of the self-assessment each of the 57 service areas is required to complete annually. One focus of the self-assessment is transition steps and services. Seven hundred files were reviewed for transition steps and services. Across the 57 service areas, 59.28% of IFSPs contained the required transition steps and services.
- B. Notification to LEA, if child potentially eligible for Part B Given the fact that Michigan is a birth mandate state and the Part C local lead agency is the Intermediate School District, notification from Part C is internal and takes place as the child is identified as potentially Michigan Special Education eligible at any time from birth to age three. Any child found eligible for Michigan Special Education is automatically transitioned into Part B Special Education at age three. Therefore, LEAs are notified of 100% of children potentially eligible for Part B. Michigan Special Education Rule R 340.1861 (Records; maintenance; content; transfer of records; release) describes the school district requirements.

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C. Transition conference, if child potentially eligible for Part B From the self-assessment sample of files, 359 children who had reached three years of age were potentially eligible for Part B services. Of those, 303 IFSPs showed evidence of a transition conference, representing 84.40% of the sample.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that Occurred for FFY 2005:

A transition guideline document was developed, disseminated, and presented statewide in fall 2005. The document delineated and clarified Part B and Part C transition requirements as defined in the federal regulations. Service areas report that the document has been helpful to them in meeting the transition requirements. Michigan is looking forward to a continuation of improvement based on the positive gains in the past year and the ongoing improvement activities.

Changes in the 618 data collection fields are in development. The interagency team has met with the grantee on three occasions. The notification to LEA field is currently available but not required. Training and adjustment of the reports will be completed in the next reporting period.

Because Michigan is a birth mandate state with the local lead agency being the Intermediate School District, OSEP has provided us with guidance explaining that we are 100% compliant in regards to the notification to LEA requirement.

Revisions, <u>with Justification</u>, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2005:

Timelines for activities were extended because we continue to focus on the redesign of the *Early On* system. While the partnership between Part C and section 619 of Part B is progressing, complementary policies are yet to be developed. The parent training opportunities were delayed due to lack of appropriate applicants. The contract had to be re-bid. Once the grant was awarded the grantee was required to include parents in their planning process.

Overview of the Annual Performance Report Development:

Please see explanation preceding Indicator #1.

Monitoring Priority: Effective General Supervision Part C/General Supervision

Indicator 9: General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent of noncompliance corrected within one year of identification:

- a. # of findings of noncompliance,
- b. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = [(b) divided by (a)] times 100.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the state has taken.

FFY	Measurable and Rigorous Target
2005	100%

Actual Target Data for FFY 2005-2006:

Table 1 below illustrates the percentage of service areas not in compliance in FFY 2004 compared to the percentage of service areas not in compliance in FFY 2005 as demonstrated through the local self-assessment (self-review) and analysis of 618 data (data review). Results from the on-site review of records at 12 service areas are illustrated in Table 2. Although the total number of service areas not in compliance in Table 2 did not improve, for the most part individual service areas did increase the percentage of compliance for each indicator.

Table 1

Tal	ole 1				
	Indicator	Monitoring Method	% service areas not in compliance	% service areas not in compliance	% corrected within
4	Develops of infants and	Call Davieur	2004 11%	2005	1 year
1.	Percent of infants and	Self-Review	11%	34%	-23%
	toddlers with IFSPs who	On-site visit*	N1/A		
	receive their early	Data Review	N/A		
	intervention services on	Other: Specify	N/A		
	their IFSPs in a timely				
	manner. Percent of infants and	Self-Review	F00/	070/	400/
2.	toddlers with IFSPs who		50%	37%	13%
	primarily receive early	On-site visit*	400/	200/	00/
	intervention services in the	Data Review	48%	39%	9%
	home or programs for	Other: Specify	N/A		
	typically developing				
	children.				
3.	Percent of infants and	Self-Review			
٥.	toddlers with IFSPs who	On-site visit			
	demonstrate improved	Data Review			
	positive social-emotional	Other: Specify			
	skills, acquisition and use	Outer. Specify			
	of knowledge and skills,				
	use of appropriate				
	behaviors to meet their				
	needs.				
4.	Percent of families	Self-Review			
	participating in Part C who	On-site visit			
	report that early	Data Review			
	intervention services	Other: Specify			
	helped the family know	' '			
	their rights, effectively				
	communicate their				
	children's needs, and help				
	their children develop and				
	learn.				
5.	Percent of infants and	Self-Review	N/A		
	toddlers birth to 1 with	On-site visit	N/A		
	IFSPs.	Data Review	34%	34%	0%
		Other: Specify	N/A		
6.	Percent of infants and	Self-Review	N/A		
	toddlers birth to three with	On-site visit	N/A		
	IFSPs.	Data Review	30%	22%	8%
<u> </u>		Other: Specify	N/A		==:
7.	Percent of eligible infants	Self-Review	78%	83%	-5%
	and toddlers with IFSPs for	On-site visit*	25::		
	whom an evaluation and	Data Review	93%	95%	-2%
	assessment and an initial	Other: Specify	N/A		
	IFSP meeting were				
	conducted within Part C's 45-day timeline.				
8.	Percent of all children	Self-Review	55%	44%	11%
٥.	exiting Part C who	On-site visit*	JJ /0	77 /0	11/0
	received timely transition	Data Review	N/A		
1	planning to support the	Other: Specify	N/A N/A		
1	child's transition to	Outer. Specify	IN/A		
	preschool and other				
	appropriate community				
	services by their third				
	birthday.				

Table 2

Table 2	Indicator	1 – Timely	Indicator 2 – Natural		Indicator 7 –		Indicator 8 -	
		vices	Environments		45-day Timeline		Transitions	
	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
	reporting period	reporting period	reporting period	reporting period	reporting period	reporting period	reporting period	reporting period
Calhoun	N/A	5%	N/A	90%	65.2%	94%	0%	32%
Eaton	N/A	70%	65%	100%	46.2%	84%	0%	90%
Genesee	N/A	0%	79.8%	87%	59.2%	65%	41.9%	85%
Gratiot/Isabella	N/A	2%	100%	69%	81.8%	52%	33%	82%
Kent	N/A	38%	N/A	86%	41.4%	64%	44.4%	45%
Lapeer	N/A	28%	92%	100%	71.4%	68%	16.7%	44%
Lewis-Cass	N/A	0%	93.1%	63%	78.6%	65%	50%	69%
Livingston	N/A	55%	36.4%	96%	6.7%	70%	100%	65%
Monroe	N/A	70%	N/A	93%	40%	85%	0%	74%
Shiawassee	N/A	45%	40.6%	84%	64.3%	73%	0%	11%
St. Clair	N/A	20%	97.8%	40%	70.6%	79%	0%	63%
Washtenaw	N/A	5%	83%	83%	63.3%	75%	0%	74%
TOTAL not in compliance	N/A	12/12	5/9	7/12	12/12	11/12	11/12	11/12

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage That Occurred for FFY 2005:

Review of the data in Table 1 indicates that there is low performance, giving credence to the change in the monitoring system. The monitoring process that involved data review and findings reported, did not convey the expectations clearly enough to result in significant improvement. The local self-assessment without periodic monitoring of progress throughout the improvement process also did not yield the results desired.

Analyzing Table 1, there was compliance slippage in Indicator 1. The clarification and objective definition of timely manner resulted in more service areas not meeting this requirement. Distribution of the clarified definition provides information and guidance to the field.

There was also compliance slippage in Indicator 7. The state 45-day expectations have been beyond the OSEP requirements (requiring a completed IFSP within 45 days) and there has been a shortage of personnel at the local level. Personnel shortages and stress on the system were two of the major reasons for the Redesign project implemented by the State Interagency Coordinating Council.

In Table 2, specific compliance percentages by service area are included to demonstrate the ongoing improvements most monitored service areas are making. Service areas were selected for this on-site record review monitoring because of compliance concerns. Although most have not yet reached compliance levels in the selected areas, most are making gains toward compliance.

Develop Key Performance Indicators

In FFY 2004, MDE staff and a group of stakeholders designed the framework for the Continuous Improvement Monitoring System (CIMS) for IDEA. The CIMS monitoring system consists of three components: Focused Monitoring, Data Verification and the Service Provider Self-Review (SPSR).

In FFY 2005, staff began development of the SPSR for Part C. The goal of the SPSR is to assist local early intervention programs to improve outcomes for children and their families through review and analysis of policies and procedures, individual child records, and survey and 618 data. In addition, the SPSR is to ensure compliance and inform the local and state stakeholders of the service area's needs.

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The SPSR is a team process conducted by each local service area. Each local program will complete the guided process using an electronic workbook to assess their compliance and performance as an early intervention provider. The results of the SPSR will direct each local improvement plan.

The SPSR has four components: Information Gathering; Key Performance Indicator Rating (KPI), Improvement Planning; and Child Specific Corrective Action Planning. The KPIs, which will guide the information gathering, are currently being aligned with the SPP/APR indicators. The formats for the improvement planning and the child specific corrective action planning have been developed.

Perform Focused Monitoring Activities

To develop the Focused Monitoring process, a pilot was conducted in FFY 2004 in two service areas. Information from the two focused monitored sites has indicated that major improvement has begun. In the FFY 2005 another two Part C site monitoring visits were conducted. Both local service areas were selected due to their identification rate. One service area is currently involved in the improvement planning phase of focused monitoring; the second has initiated the improvement plan.

Train CIMS staff on Part C Service Provider Self-Review and Implement Service Provider Self-Review

There have been development challenges to completing the electronic workbook for the SPSR. Issues arose regarding the system differences between special education and early intervention. Much of the format for the SPSR was developed under the special education system. In the implementation of Part C SPSR, changes had to be made to accommodate the Part C system. It took longer than expected to develop the workbook. Time allotted for service areas to finish the workbook decreased each day and a decision was made to postpone the Part C SPSR implementation to ensure a quality system.

Monitor Progress on all Five ECO Center Family Outcomes

Michigan, due to time constraints, initiated the NCSEAM Family Survey. At the time the family survey needed to be distributed, the ECO Center was still validating their family survey. The selection of all five family outcomes was decided during the Redesign process prior to the development of the SPP indicators. Aligning the five ECO Center Family Outcomes with the SPP Family Outcomes using the NCSEAM family survey is more difficult than expected. Determination on how this should be done will be further analyzed.

Revisions, <u>with Justification</u>, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2005:

Timelines for some activities reflected in the SPP were extended because we continue to focus on the redesign of the *Early On* system including improvements in our collaboration with partner agencies and the field. Some of the activities were purposely postponed in order to receive input from stakeholders; others were postponed to ensure high quality work.

Overview of the Annual Performance Report Development:

Please see explanation preceding Indicator #1.

Monitoring Priority: Effective General Supervision Part C/General Supervision

Indicator 10: Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular

complaint.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(1.1(b) + 1.1(c))] divided by 1.1] times 100.

FFY	Measurable and Rigorous Target
2005	100%

Actual Target Data for 2005:

No Part C complaints were issued reports in FFY 2005.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage That Occurred for 2005:

One Part C complaint was received, but it was withdrawn before a report was issued.

Revisions, <u>with Justification</u>, to Proposed Targets/Improvement Activities/Timelines/Resources for 2005:

Overview of the Annual Performance Report Development:

Please see explanation preceding Indicator #1.

Monitoring Priority: Effective General Supervision Part C/General Supervision

Indicator 11: Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.
(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(3.2(a) + 3.2(b))] divided by 3.2 times 100.

FFY	Measurable and Rigorous Target
2005	100%

Actual Target Data for 2005:

No due process hearings were requested in FFY 2005.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage That Occurred for 2005:

Revisions, <u>with Justification</u>, to Proposed Targets/Improvement Activities/Timelines/Resources for 2005:

Overview of the Annual Performance Report Development:

Please see explanation preceding Indicator #1.

Monitoring Priority: Effective General Supervision Part C/General Supervision

Indicator 13: Percent of mediations held that resulted in mediation agreements. (20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(2.1(a)(i) + 2.1(b)(i))] divided by 2.1] times 100.

FFY	Measurable and Rigorous Target
2005	Michigan Part C did not meet the threshold of ten mediation requests.

Actual Target Data for 2005:

No Part C mediations were held in FFY 2005.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2005:

Revisions, <u>with Justification</u>, to Proposed Targets/Improvement Activities/Timelines/Resources for 2005:

Overview of the Annual Performance Report Development:

Please see explanation preceding Indicator #1.

Monitoring Priority: Effective General Supervision Part C/General Supervision

Indicator 14: State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: State reported data, including 618 data, State Performance Plan, and Annual Performance Reports, are:

- a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and
- b. Accurate (describe mechanisms for ensuring error free, consistent, valid and reliable data and evidence that these standards are met).

FFY	Measurable and Rigorous Target
2005	100%

Actual Target Data for 2005:

The state reported data, including 618 and the State Performance Plan, were each submitted on time. The 618 data reporting child count, including race and ethnicity, were submitted by February 1, 2006. The exiting, personnel, and dispute resolution 618 data were reported by November 1, 2005. There was a revision submitted regarding the child count data for February 1, 2006. One of the 57 local service areas submitted the data for the incorrect year; the revision was submitted in June 2006.

Michigan also submitted its State Performance Plan prior to the December 2, 2005 due date. The data included in the SPP was as accurate as possible; however, because of the new request to define and measure the timeliness of services and the newly clarified 45-day IFSP timeline, the data for those two indicators was not exact.

Considering the timeliness of all data submitted in FFY 2005 (two 618 submissions and 11 SPP indicators), and the accuracy, with three exceptions (one 618 submission and nine SPP indicators), Michigan has calculated a compliance rate of 88%.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage That Occurred for 2005:

There has been discussion regarding the proposed list of changes for the data fields. According to the data contractor, data elements desired to enable the state to monitor local progress on SPP indicators are difficult to implement. Changing the data fields will take more than one year. Some of the data will have to be collected through monitoring and/or other means until the data collection system can be updated or modified. Staff is analyzing the desired data elements to assess which can be conducted by monitoring.

State- Michigan

Additionally, staff is closely examining the variety of needs related to data collection and exploring options for upgrading the system to meet all of the identified needs.

Revisions, <u>with Justification</u>, to Proposed Targets/Improvement Activities/Timelines/Resources for 2005:

Timelines for some of the activities reflected in the SPP were extended because we continue to focus on the redesign of the *Early On* system. Some of the activities were purposely postponed in order to receive input from stakeholders; others were postponed to ensure high quality work.